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Bib Data Sheet

CONFIRMATION NO. 2789

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|---|---|-------------------------------|---|-------------------------------------|
| SERIAL NUMBER 10/072,599 | FILING DATE 02/05/2002 RULE | CLASS 604 | GROUP ART UNIT 3763 | ATTORNEY DOCKET NO. CB-11 |
| APPLICANTS Robert H. Dahla, Sunnyvale, CA; Jean Woloszko, Mountain View, CA; | | | | |
| ** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/586,295 06/02/2000 WHICH IS A DIV OF 09/248,763 02/12/1999 PAT 6,149,620 WHICH CLAIMS BENEFIT OF 60/096,150 08/11/1998 AND CLAIMS BENEFIT OF 60/098,122 08/27/1998 AND CLAIMS BENEFIT OF 60/299,094 06/18/2001 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/18/2002 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY CA | SHEETS DRAWING 28 | TOTAL CLAIMS 82 |
| INDEPENDENT CLAIMS 5 | | | | |
| ADDRESS 021394 | | | | |
| TITLE Electrosurgical apparatus and methods for treatment and removal of tissue | | | | |
| FILING FEE RECEIVED 2024 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |